## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

1043325-1

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20				•	RATE	FEE	1 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		· e			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		* 2			X40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL	,	OR	TOTAL	870
CLAIMS AS AMENDED - PAR					T II			101712	·	1011	OTHER	
(Column 1)				(Colu	(Column 3)		SMALL	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	20	9	=3		X\$ 9=		OR	X\$18=	5400
	Independent	• 5	Minus	<u>5</u>		=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	JUIPLE DEI	PENDEN	CLAIM		ا ا	+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	5404
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												PCI
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total 🧓	*	Minus	** 2	23	=		X\$ 9=	•	OR	X\$18=	
	Independent	*	Minus	***	5		11	X40=	•	OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		J	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
• :		(Column 1)		(Colu		(Column 3)		10011.122		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	11	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>┙</b> ┃	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL	-	ΛP	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If th "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
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